

Chris Aquino

From: WMATC E-Filing <administrator@wmatc.gov>
Sent: Friday, January 09, 2015 10:59 AM
To: Constantine Kolouas; Chris Aquino
Subject: 2015 Annual Report - WMATC No: 276, Carrier Name: Airport Metro Connection, Inc.

Washington Metropolitan Area Transit Commission 2015 Carrier Annual Report Form

FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2015, must file a complete 2015 annual report and pay a \$150 annual fee on or before **February 2, 2015**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$150 late fee**. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **\$150 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2015.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

1. ANNUAL REPORT OF:

WMATC No.: 276

Name of Carrier (as shown on certificate of authority): Airport Metro Connection, Inc.

Trade Name: Excellent Tours

Principal Place of Business

Street Address: 4324 41st Street

Apt./Suite:

City: Brentwood

State: MD

Zip: 20722

Mailing Address (if different from street address)

Street:

Apt./Suite:

City:
State:
Zip:

Telephone Number: (301)773-1018
Other Telephone: (888)559-5066
Fax Number: (301)773-1077
E-mail: reservations@excellentdctours.com

2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

USDOT No.: 1512245
DCTC No.:
Virginia DMV passenger carrier No.: 961
Maryland PSC No.: 2850

3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Name: Tsegaye Mamo
Title: President
Telephone Number: (240)832-5700
Other Telephone: (301)773-1018
Fax Number: (301)773-1077
E-mail: tmamo@excellentdctours.com

4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see www.wmatc.gov.

Name of Registered Agent for Service of Process:

Agent Address:
Apt./Suite:
City:
State:
Zip:
Telephone Number:
E-mail:

5. *CHANGES: Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

None

6. *LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS: (1) list your vehicles below; **or** (2) upload a complete vehicle list to this form. Include **all** required information.

Fleet No.	Year	Make	Vehicle VIN	License Plate	State	Seating Cap.	Wheel Chair
601	2014	Chevrolet	1GNSKJE73ER127401	56898B	MD	7	No
11	2010	Ford	1FDWE3FL8ADA49256	018P46	MD	15	No
501	2012	Mercedes	WDZPE8CC0C5629317	027P04	MD	18	No
401	2012	International	4DRXWSKK3CJ454678	022P40	MD	25	Yes
9	2006	Chevrolet	1GBE5V1226F434791	010P40	MD	30	No
8	2006	GMC	1GDE5V1216F419500	004P94	MD	34	No
201	2012	Freightliner	1FVACWDT1CHBF8665	021P44	MD	37	No
10	2002	MCI	1M83JMPA42P061928	010P41	MD	57	No
101	2005	MCI	1M86DMDA15P056599	019P97	MD	56	No
301	2012	MCI	2MG3JM8A4CW066180	022P83	MD	57	No

***Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.**

7. *CERTIFICATION:

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

Name: Tsegaye Mamo

Title: President

Date: 01/09/2015